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## APPLICANTS

William B. Best, Norfolk, MA;

\*\* CONTINUING DATA \*\*\*\*\* NONE  
GLW

\*\* FOREIGN APPLICATIONS \*\*\*\*\* NONE  
GLW

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>GLW</i>	STATE OR COUNTRY MA	SHEETS DRAWING 3	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 2
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## ADDRESS

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## TITLE

Hockey glove

FILING FEE  RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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